Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							ſ	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			32_ minus 20=		13		Ī	X\$ 9=	117,0	ŞΑ	X\$18=	
INDEPENDENT CLAIMS			9 - mi	nus 3 =	9		İ	X42=	(1770)	OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				ŀ					
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+140=	(100	OR	+280=	
/ CLAIMS AS AMENDED - PART II								TOTAL	492,0	SOR	TOTAL	
1	18/0	(Column 1)	MENDED	- PAR (Colui		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	3
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 33	Minus	*	33	=		X\$ 9=		OR	X\$18=	
	Independent	• /	Minus	***	3	-		X42=		OR	X84=	
LÙ.	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM			+140=		ОЯ	+280=	
								TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE	
		_	0011. FEE (ADDII. FEE	- ,					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE_
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X42=	,	OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		┚┟	. 140			.000	-
								+140= /		OR	+280= TOTAL	
		ODIT. FEE		OR	ADDIT. FEE							
T		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 -			. 1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	addi- Tional Fee
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	±	Minus -	***		=	 	X42=			X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE	·
		nber Previously Pa					er four	nd in th app	propriate box	in co	lumn 1.	